

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YD	5621	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			10-12-1
RESPONSE FORMALITY REVIEW	HW	CL630	10-19

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
6	1
11	5
03	04
1	✓✓
2	✓✓
3	✓✓
4	✓✓
5	✓✓
6	✓✓
7	✓✓
8	✓✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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